

JCS/5

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|----------|--------|----------|
| FEES DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 43 | 8/13/01 |
| FORMALITY REVIEW | 1u | 1019 | 10-01-01 |
| RESPONSE FORMALITY REVIEW | H/L | 1079 | 01/07/02 |
| Response | 1u | 1019 | 04-26-02 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | 10-25-01 | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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